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SECRETARY OF STATE
TALL AHASSEF F. STATE

J. SAULSBERRY EXAMINER

NOV 23 2011

COVER LETTER

SUBJECT: Daniel Lawn Care and Service Name of Limited Liability Company	cs, LLC
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Daniel Lawn Care and Firm/Company	'Services, LLC
Jacksonville, FL 322	1d, B2-42/ 22
For further information concerning this matter, please call:	eport notification) LECTRON 22 PARTY OF THE PROPERTY OF THE P
Terry L. Danie at (904) 6/2 Name of Person Area Code Enclosed is a check for the following amount:	& Daytime Telephone Number
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is}\$\$	Certificate of Status &
MAILING ADDRESS: STREET	/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Daniel Lawn Care and a	Services, LLC	
Daniel Lawn Care and S (Name of the Limited Liability Comp. (A Florida Limited	pany as it now appears on ou d Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compa	iny were filed on $10/6$	4/2011 and assigned
Florida document number <u>L 000 3200</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>		
The new name must be distinguishable and end with the words "Li" L.L.C."	imited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		70 <u>SE</u>
(<u>Principal office address MUST BE A STREET ADDRESS)</u>		
		A
Enter new mailing address, if applicable:		2 AN
(Mailing address MAY BE A POST OFFICE BOX)	**************************************	<u> </u>
		0 3 0 A
B. If amending the registered agent and/or registered registered agent and/or the new registered office address here.		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	P	· t
	Enter Flor	ida street address
	City	, Florida Zip Code
	,	*

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Mar MGRM = M	nager ' anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
ugrm	Terry L. Daniel	31915tonebrier Ridge Dr Orange Park, FL 32005	Add Remove
<u>ugrm</u>	Terry L. Daniel	9526 Argyle Forest Blyd B2-427 Jacksonwill, FL 32222	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter chan	nge(s) here: (Attach additional sheets, if necessary.)	
			FILE 2011 NOV 22 1 SEGRETARY OF
	9NOV 2011 Stry J. James	- Agina	FSIRIT
	Signature of a member 1 cry L. Danie	er or authorized representative of a member	

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Filing Fee: \$25.00